



REQUEST FOR ONE-FOR-ONE EXCHANGE OF SEA SCALLOP ACCESS AREA TRIP

SUBMIT TO
SEA SCALLOP TRIP EXCHANGES (SFD)
US DEPARTMENT OF COMMERCE, NOAA
NATIONAL MARINE FISHERIES SERVICE
ONE BLACKBURN DRIVE, GLOUCESTER, MA 01930
FAX – (978) 281-9135

Trip Exchange: This form must be used to request an exchange of Sea Scallop Access Area trip between two vessels that have Sea Scallop Access Area Trips available to exchange. Exchanges of Access Area trips are on a one-to-one basis. One form must be used for each exchange. This form may be duplicated for additional exchange requests.

- The vessels indicated below must have trips available to exchange.
- Vessels may not exchange trips within the same Access Area.
- Vessel operators may not initiate the Access Area trip requested below until vessel owners receive written notice that the request has been approved.
- Written approval or disapproval of the request will be provided within 15 days of receipt of this form.

Vessel A Information:

Owner Name: _____ Permit #:

Vessel Name: _____ Official #:

The owner of Vessel A wishes to give one trip to Vessel B in the following area (Circle One):

CAI CAII NLCA HCAA

Vessel B Information:

Owner Name: _____ Permit #:

Vessel Name: _____ Official #:

In exchange, the owner of Vessel B wishes to give one trip to Vessel A in the following area (Circle One):

CAI CAII NLCA HCAA

Signed: _____
(Owner of Vessel A)

Signed: _____
(Owner of Vessel B)

Dated: _____

Dated: _____

Area Codes: Closed Area I = CAI; Closed Area II = CAII; Nantucket Lightship Closed Area = NLCA; Hudson Canyon Access Area = HCAA

Signature of this form certifies that the information provided on this form is true, complete and correct to the best of the vessel owner's knowledge, and made in good faith (18 U.S.C. 1001). Making a false statement on this form is punishable by law.

Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 5 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining data needed, and completing and reviewing the information. Send comments regarding this burden estimate or suggestions for reducing this burden to NMFS, One Blackburn Drive, Gloucester MA 01930; and to OMB, Paperwork Reduction Project, Washington, DC 20509. OMB Approval No. 0648-0491; Expires June, 2007.